Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)	Type or print in	ink.	Pale Stari	CALIFORNIA 200° /0!!			
SEE INSTRUCTIONS ON REVERSE	Statement covers period from05/21/2006 through06/16/2006	Date of election if applicable (Month, Day, Year)	JUL REGISTRA By [WUY]	-3 2006, age			
State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee	rmplete Parts 1, 2, 3, and 4. Primarily Formed Ballot Measure Committee Controlled Sponsored Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee Also Complete Part 7)	2. Type of Statement: Preelection Statemer Semi-annual Statemer Termination Statemer (Also file a Form 410 Amendment (Explain	ent nt Termination)	Quarterly State Special Odd-Y Supplemental Statement - Att	′ear Report Preelection		
3. Committee Information COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) Norby for Supervisor STREET ADDRESS (NO P.O. BOX)	D. NUMBER 1237231	Treasurer(s) NAME OF TREASURER Betty Presley MAILING ADDRESS					
CITY STATE ZIP CO	THE STATE OF THE S	NAME OF ASSISTANT TREAS	STATE	ZIP CODE	AREA CODE/PHONE		
OPTIONAL: FAX / E-MAIL ADDRESS	DE AREA CODE/PHONE	OPTIONAL: FAX / E-MAIL ADD	STATE	ZIP CODE	AREA CODE/PHONE		
4. Verification I have used all reasonable diligence in preparing and reviewing under penalty of perjury under the laws of the State of California Executed on	By Signature of Con	swledge the information contained he signature of Controlling Officeholder, Candidate, State Weasure P	nt Treasurer roponent or Responsible Officer State Measure Proponent		and complete. I certify		

Recipient Committee Campaign Statement Cover Page — Part 2

COVER PAGE - PART 2									
CAL F	IFORNIA ORM	4	460						
Page	2	of	20						

Officeholder or Candidate Controlled Comm	nittee	6.	Primarily Formed Ball	ot Measure (Committee	
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE			
Chris Norby						
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRIBOARD of Supervisors County of Orange	CT NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTIO	N	SUPPORT OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO AND STREET) (CITY STATE ZIP		Identify the controlling of	iceholder, can	didate, or state meas	ure proponent, if any.
			NAME OF OFFICEHOLDER, CA	NDIDATE, OR PRO	OPONENT	
Related Committees Not Included in this St not included in this statement that are controlled by you contributions or make expenditures on behalf of your ca	or are primarily formed to receive		OFFICE SOUGHT OR HELD		DISTRICT	NO. IF ANY
COMMITTEE NAME	I.D. NUMBER					
NAME OF TREASURER COMMITTEE ADDRESS STREET ADDRESS (NO P.O. E	CONTROLLED COMMITTEE? YES NO SOX)	7.	Primarily Formed Can officeholder(s) or candidate(s) NAME OF OFFICEHOLDER OR	s) for which this	eholder Committee s committee is primarily OFFICE SOUGHT OR HE	formed.
CITY STATE ZIP	CODE AREA CODE/PHONE					OPPOSE
COMMITTEE NAME			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HE	SUPPORT OPPOSE
	I.D. NUMBER		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HE	SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLED COMMITTEE? YES NO		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HE	ELD SUPPORT
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. E	OOX)					OPPOSE
CITY STATE ZIP (CODE AREA CODE/PHONE		Atta	ch continuatio	n sheets if necessary	,

Campaign Disclosure Statement Summary Page

Type or print in ink.

Amounts may be rounded to whole dollars.

SEE INSTRUCTIONS ON REVERSE through __ NAME OF FILER Norby for Supervisor 1237231 Column A Contributions Received Column B **Calendar Year Summary for Candidates** TOTAL THIS PERIOD CALENDAR YEAR Running in Both the State Primary and (FROMATTACHED SCHEDULES) TOTAL TO DATE **General Elections** 2. Loans Received Schedule B, Line 3 1/1 through 6/30 7/1 to Date 0.00 0.00 3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1+2 \$ _____19,370.00 20. Contributions 74,708.05 Received 4. Nonmonetary Contributions Schedule C, Line 3 0.00 0.00 21. Expenditures 5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3+4 \$ _____19,370.00 \$ ____ Made **Expenditures Made Expenditure Limit Summary for State** 247,659.82 **Candidates** 7. Loans Made Schedule H, Line 3 0.00 0.00 22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit) 9. Accrued Expenses (Unpaid Bills)Schedule F, Line 3 5,995.77 Date of Election 10. Nonmonetary Adjustment Schedule C, Line 3 Total to Date 0.00 (mm/dd/yy) 0.00 **Current Cash Statement** 12. Beginning Cash Balance Previous Summary Page, Line 16 \$ _____17,745.55 To calculate Column B, add 13. Cash Receipts Column A, Line 3 above 19,370.00 amounts in Column A to the 14. Miscellaneous Increases to Cash Schedule I, Line 4 corresponding amounts *Amounts in this section may be different from amounts 0.00 from Column B of your last reported in Column B. 15. Cash Payments Column A, Line 8 above report. Some amounts in 86,004.67 Column A may be negative 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 51,110.88 figures that should be If this is a termination statement, Line 16 must be zero. subtracted from previous period amounts. If this is the first report being filed 17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 \$ _____0.00 for this calendar year, only carry over the amounts Cash Equivalents and Outstanding Debts from Lines 2, 7, and 9 (if 18. Cash Equivalents See instructions on reverse \$ any). 19. Outstanding Debts Add Line 2 + Line 9 in Column B above \$ _____7,500.00 FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Schedule A **Monetary Contributions Received**

Type or print in ink.
Amounts may be rounded to whole dollars.

SCHEDULE A

Statement covers period

				from05/21/2	2006	FORM 460		
SEE INSTRUCTION	ONS ON REVERSE			through	2006 Pa	_ Page4 of20		
Norby for S						NUMBER 237231		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	1	R ELECTION TO DATE REQUIRED)	
06/05/2006	AT&T CA PAC (#981470)	☐IND INCOM ☐OTH ☐PTY ☐SCC		600.00	600.0	0 P06	600.0	
06/16/2006	Barker Management Inc.	□IND □COM ☑OTH □PTY □SCC		1,500.00	1,500.0	0 P06	1,500.0	
05/31/2006	Thomas M. Barnett	⊠IND □COM □OTH □PTY □SCC	Retired None	250.00	250.0	0 P06	250.0	
06/03/2006	James Beam	XIND COM OTH PTY SCC	President Beam & Associates	500.00	500.0	0 P06	750.0	
06/03/2006	Bridgecreek Realty Group	□IND □COM ☑OTH □PTY □SCC		1,000.00	1,000.0	0 P 06	1,000.0	
			SUBTOTAL\$	3,850.00	and the same said	10.2	ald to be the	
Amount red (Include all Amount red	A Summary ceived this period – itemized monetary contributions. I Schedule A subtotals.) ceived this period – unitemized monetary contributions	of less than ¶	\$\$ \$100\$	19,300.00 70.00	*Contributor IND – Indivic COM – Reci (oth	r Codes dual pient Comm er than PTY	nittee	
Total mone	etary contributions received this period. 1 and 2. Enter here and on the Summary Page, Colun				PTY - Politic	cal Partv	or Committee	

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Type or print in ink.
Amounts may be rounded

SCHEDULE A (CONT.)

,	Contributions Received	to whole		Statement covers period from05/21/2006		CALIFORNIA 460		
NAME OF FILER				through <u>06/16/2</u>	006	Page.	5	of <u>20</u>
Norby for Su	nervisor					I.D. NU	MBER	
,			 			1237	7231	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)		R TODATE	
06/01/2006	California Healthcare Association PAC (#790773)	☐IND INCOM ☐OTH ☐PTY ☐SCC		-500.00		0.00	P 06	1,500.00
06/06/2006	California Pacific Homes, Inc.	□IND □COM ☑OTH □PTY □SCC		500.00	5.6	00.00	P 06	1,500.00
06/02/2006	Steven Chen	⊠IND □COM □OTH □PTY □SCC	Director Los Angeles National Bank	100.00	10	00.00	P 06	199.00
05/24/2006	Chevron Texaco Corporation	□IND □COM ☑OTH □PTY □SCC		250.00	25	50.00	P 06	1,500.00
06/14/2006	Ms. Lorri Crowe	IND COM OTH PTY SCC	Pinancial Officer OC High School for the Arts	1,100.00	1,10	00.00	P 06	1,500.00
		1,450.00						

*Contributor Codes

IND - Individual

COM – Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Type or print in ink.
Amounts may be rounded

SCHEDULE A (CONT.)

All Contributions Received		to whole dollars.		Statement covers period from05/21/2006		california 460		
NAME OF FILER				through <u>06/16/2</u>	1006	Page _	6	of <u>20</u>
Norby for St	upervisor					I.D. NUI		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALENDAR YE	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)		R ELECTION TO DATE REQUIRED)
05/25/2006	Elspeth K. Delaney	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Attorney Hooper, Lundy & Bookman, LLC	100.00	10	00.00	P 06	100.00
06/02/2006	Fisk Automotive	□IND □COM 図OTH □PTY □SCC		200.00	20	0.00	P 06	200.00
05/26/2006	Pam Gaffen	⊠IND □COM □OTH □PTY □SCC	Owner Gafcon Inc	300.00	30	0.00	P 06	550.00
06/02/2006	Gon-Rey LLC	□IND □COM 図OTH □PTY □SCC		1,000.00	1,00	0.00	P 06	1,000.00
05/24/2006	Government Solutions, Inc.	□IND □COM ③OTH □PTY □SCC		100.00	10	0.00	P 06	848.00
			SUBTOTAL \$	1,700.00		*		

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FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Type or print in ink. Amounts may be rounded to whole dollars

SCHEDULE A (CONT.)

Statement covers period

		to whole	dollars.	Statement cov		FORM 460		
NAME OF FILER				through <u>06/16/2</u>	006	Page	7	of <u>20</u>
Norby for Su	pervisor					I.D. NUM	BER	
						12372	31	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	EAR TODATE		ODATE
05/31/2006	James F. Grier	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Attorney James Grier, Esq.	100.00	10	0.00	P 06	100.00
06/16/2006	John Hayrapetian	☑IND □COM □OTH □PTY □SCC	Architect John Hayrapetian	1,000.00	1,00	0.00	P 06	1,000.00
05/25/2006	Patric Hooper	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Attorney Hooper, Lundy & Bookman, LLC	300.00	30	0.00	P 06	300.00
05/26/2006	Susan Hori	XIND □COM □OTH □PTY □SCC	Attorney Manatt Phelps Phillips	250.00	25	0.00	P 06	749.00
05/31/2006	Elizabeth Colleen Johns	⊠IND □COM □OTH □PTY □SCC	Homemaker None	1,500.00	1,500	0.00	9 06	1,500.00
			SUBTOTAL S	3,150.00	egytte i et i perio			

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PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

FORM

Statement covers period

from ____05/21/2006

NAME OF FILER				through <u>06/16/2</u>	⁰⁰⁶ F	age	<u>8</u> o	20
Norby for St	pervisor		7				IUMBER 17231	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)		CALENDAR YEAR TO DA	
05/31/2006	William B. Johns, Jr.	⊠IND □COM □OTH □PTY □SCC	Sales Great Ideas, Inc	250.00	250	.00	P 06	250.00
06/02/2006	JR Enterprises	☐IND ☐COM ☑OTH ☐PTY ☐SCC		250.00	500	.00 1	P 06	500.00
	Nahla Kayali	⊠IND □COM □OTH □PTY □SCC	Director Access California Services	250.00	250	.00	P 06	250.00
05/25/2006	Robert W. Lundy, Jr.	☑IND □COM □OTH □PTY □SCC	Attorney Hooper, Lundy & Bookman, LLC	500.00	500	.00	2 06	500.00
06/06/2006	Mr. Joseph Maag	□COM □OTH	Retired None	50.00	150	.00 E	9 0 6	200.00
		1,300.00	4374 34					

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OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A	(CONT.)
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CALIFORNIA ACO

Statement covers period

				from05/21/2006		FOR	M 40U
NAME OF FILER				through <u>06/16/2</u>		_	9 of 20
Norby for Su	pervisor	<u> </u>	Y		}	D. NUMBE	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO D. CALENDAR YEA (JAN. 1 - DEC. 3	R	PER ELECTION TO DATE (IF REQUIRED)
05/24/2006	Mr. Thomas Malloy	⊠IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Owner Trench Shoring Co.	500.00	500	.00 P0	6 750.00
06/06/2006	Manufactured Housing Education PAC - MHET PAC (#820165)	□IND INCOM □OTH □PTY □SCC		250.00	250	.00 PO	6 1,500.00
06/16/2006	Fidel Mendoza	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Executive Texas Builders	1,500.00	1,500	.00 PO	6 1,500.00
06/16/2006	Precise Air Systems, Inc.	□IND □COM ☑OTH □PTY □SCC		1,500.00	1,500	.00 P0	6 1,500.00
05/25/2006	Mark E. Reagan	□COM □OTH	Attorney Hooper, Lundy & Bookman, LLC	250.00	250	00 P0	6 250.00
			SUBTOTAL \$	4,000.00	and the state of t		

*Contributor Codes

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(other than PTY or SCC)

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PTY - Political Party

SCC - Small Contributor Committee

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA FORM

Statement covers period

				from05/21/2	006	FORM	400
				through <u>06/16/2</u>	006 Pa	ge10	of20
NAME OF FILER					1.0	NUMBER	
Norby for Su	upervisor	,				237231	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DA CALENDAR YEAR (JAN. 1 - DEC. 31)		ER ELECTION TO DATE F REQUIRED)
05/25/2006	Glenn E. Solomon	☑IND □COM □OTH □PTY □SCC	Attorney Hooper, Lundy & Bookman, LLC	350.00	. 350.	00 P 06	350.00
06/03/2006	Spach Capaldi & Waggaman, LLP	□IND □COM ☑OTH □PTY □SCC		1,000.00	1,000.	00 P 06	1,000.00
06/02/2006	John D. Stanek	☐IND ☐COM ☐OTH ☐PTY ☐SCC	Real Estate Developer Integral Partners	500.00	500.	00 P06	500.00
06/03/2006	William C. Taormina	XIND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Manager Clean City, Inc.	500.00	500.	00 P06	500.00
06/16/2006	Texas Builders	□IND □COM 図OTH □PTY □SCC		1,500.00	1,500.	00 P 06	1,500.00
			SUBTOTAL	\$ 3,850,00	2 (M . 10 (10))	To the second se	

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)
OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

Schedule D Summary of Expenditures Supporting/Opposing Other Candidates, Measures and Committees

Type or print in ink.

Amounts may be rounded to whole dollars.

SEE INSTRUCTIONAME OF FILER		through06/16/2	.006 Page I.D. NU			
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
05/31/2006	Measure to Prohibit the Use of Eminent Domain for Private Development A County of Orange	Monetary Contribution Nonmonetary Contribution Independent	Sign Assembly & Placemen	t 4,072.50		
	∑ Support ☐ Oppose	Expenditure Monetary Contribution Nonmonetary Contribution				
	Support Dppose	Independent Expenditure Monetary Contribution Nonmonetary Contribution Independent				
	Support Oppose	Expenditure				
			SUBTOTAL	\$ 4,072.50	THE CHARLES	
1. Itemized o	D Summary contributions and independent expenditures made ad contributions and independent expenditures ma	this period. (Include	e all Schedule D subtotals.)		\$_	4,072.50
3. Total contr	ributions and independent expenditures made this	s period. (Add Lines	1 and 2. Do not enter on the	e Summary Page.)	\$ _ TOTAL \$ _	4,072.50

Schedule E
Payments Made

Type or print in ink. Amounts may be rounded to whole dollars.

	SCHEDULE E
Statement covers period	CALIFORNIA 460
from05/21/2006	FORM 400
through	Page12 of20
	I.D. NUMBER
	1237231

SEE INSTRUCTIONS ON REVERSE				throug	n06/16/2006	Page	12 of
NAME OF FILER Norby for Supervisor			W 3000 1000		,	I.D. NUM	
Noily for Supervisor						1237231	L
CODES: If one of the following codes accurately describes	the navment vo	II mov o	ptor the ands. Oth			<u> </u>	
campaign paraphernalia/misc. campaign consultants contribution (explain nonmonetary)* cvc civic donations FIL candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* legal defense campaign literature and mailings	MBR member common meetings and office expenies petition circul phone banks polling and sepos postage, deli	munication i appearar ses ating survey rese very and r	s nces	RAD ran RFD re SAL ca TEL t.v TRC ca TRS sta TSF tra VOT vo	dio airtime and prod turned contributions mpaign workers' sa or cable airtime an ndidate travel, lodgin aff/spouse travel, log	uction costs laries d production costs ng, and meals dging, and meals mittees of the sam	e candidate/sponsor mail)
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD. NUMBER) AMS Response		CODE	OR	DESCRIPTION O	PAYMENT		AMOUNT PAID
AND RESPONSE		POS					7,227.20
AMS Response	·	LIT		·			6,711.33
AMS Response		LIT					3,717.19
							3,717.19
* Payments that are contributions or independent expenditures mu	ust also be summa	arized on	Schedule D.			SUBTOTAL \$	17,655.72
Schedule E Summary			W Company of the Comp				
Itemized payments made this period. (Include all Schedule E	Subtotale \						
2. Unitemized payments made this period of under \$100	. Subtotals.)	••••••	••••••	***************************************		\$	85,824.59
3. Total interest paid this period on loans. (Enter amount from S	Schedule B. Part 1	Colum		***************************************	•••••••	\$	180.08
1. Total payments made this period. (Add Lines 1, 2, and 3. Ent	ler here and on th	a Summ	any Page Column		•••••••••••••••••	\$	
, and of the		e Summ	ary rage, Column	1A, Line 6.)		TOTAL \$	86,004.67

Schedule E (Continuation Sheet)

Type or print in ink. Amounts may be rounded

SCHEDULE E (CONT

Statement covers period **CALIFORNIA** to whole dollars. **Payments Made FORM** 05/21/2006 from 06/16/2006 through SEE INSTRUCTIONS ON REVERSE Page 13 of 20 NAME OF FILER I.D. NUMBER Norby for Supervisor 1237231 CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. CMP campaign paraphernalia/misc. member communications RAD radio airtime and production costs CNS campaign consultants meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating t.v. or cable airtime and production costs FIL candidate filing/ballot fees phone banks candidate travel, lodging, and meals FND fundraising events polling and survey research TRS staff/spouse travel, lodging, and meals ND independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor LEG legal defense professional services (legal, accounting) VOT voter registration campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail) NAME AND ADDRESS OF PAYEE CODE OR DESCRIPTION OF PAYMENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER) AMOUNT PAID Betty Presley & Associates, Inc. POS 80.53 Betty Presley & Associates, Inc. PRO 850,00 G. Strahan & Associates, Inc. LIT 10,932.87 JC Evans, Inc. 1,504.23 LIT JC Evans, Inc. LIT 800.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

14,167.63

SUBTOTAL \$

Schedule E (Continuation Sheet)

Type or print in ink.

SCHEDULE	E (CONT.
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Payments Made	Amounts may be to whole do			from 05/21/2006 through 06/16/2006	CALIFO FOR	
NAME OF FILER					I.D. NUME	
Norby for Supervisor					12372	
CODES: If one of the following codes accurately describe campaign paraphernalia/misc. campaign consultants contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* legal defense campaign literature and mailings	MBR member com MTG meetings and OFC office expen PET petition circul PHO phone banks POL polling and s POS postage, deli	munications d appearance ses lating survey researe very and me	s	RAD radio airtime and product returned contributions SAL t.v. or cable airtime and product returned contributions campaign workers' salar t.v. or cable airtime and product radidate travel, lodging, staff/spouse travel, lodging transfer between commit voter registration web information technology cardials.	tion costs ies production cost and meals ng, and meals tlees of the sai	me candidate/sponso
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE (DR DES	CRIPTION OF PAYMENT		AMOUNT PAID
JC Evans, Inc.		LIT				965.49
Lewis Consulting Group						
•		CNS				2,500.00
Cherie Navarro		CNS				1,750.00
Mr. Chris Norby			See Schedule G			
		OFC	see senedare g			1,287.12
Phyllis Schneider & Associates		CNS				1,563.00
Payments that are contributions or independent expenditures must also	o be summarized on S	Schedule D				
				· · · · · · · · · · · · · · · · · · ·	SHRTOTAL 6	

Schedule E (Continuation Sheet)

Type or print in ink.

SCHEDULE E (CONT.)
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Payments Made	Amounts may be to whole do			from	05/21/200	CALIFO	460
SEE INSTRUCTIONS ON REVERSE NAME OF FILER Norby for Supervisor				through	06/16/200	I.D. NUMB	
CODES: If one of the following codes accurately described campaign paraphernalia/misc. CNS campaign consultants contribution (explain nonmonetary)* civic donations CNC candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* legal defense campaign literature and mailings	MBR member com MTG meetings and OFC office expen PET petition circul PHO phone banks POL polling and s POS postage, deli	munications appearance ses ating urvey resear very and me	s	RAD ra RFD ra SAL co TEL t. TRC co TRS s TSF tr VOT v	adio airtime and eturned contribut ampaign workers v. or cable airtim andidate travel, letaff/spouse trave ransfer between oter registration	production costs	s ne candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR DE	SCRIPTION (OF PAYMENT		AMOUNT PAID
Right on Time Signs		СМР					4,072.50
Tony Siciliani		LIT					14,450.00
Tony Siciliani		LIT					5,546.00
Tony Siciliani		LIT					9,625.00
The Monaco Group Inc.		LIT					12,242.13
Payments that are contributions or independent expenditures must als	so be summarized on :	Schedule D.				SUBTOTAL \$	45,935.63
						- · - · · · · · · ·	**********

Schedule F Accrued Expenses (Unpaid Bills)

Type or print in ink. Amounts may be rounded to whole dollars.

State	ment covers period	CALIFORNIA AGO
from	05/21/2006	FORM 400
through	06/16/2006	Page 16 of 20
		ID MUMBER

			110111		<u> </u>
SEE INSTRUCTIONS ON REVERSE			through06/16/	2006 Page	16 of 20
NAME OF FILER				I.D. NU	MRER
Norby for Supervisor				1237	
CODES: If one of the following codes accurately describ	so the newwork in the				
CODES: If one of the following codes accurately describ CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events ND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member communication MTG meetings and appearar OFC office expenses PET petition circulating PHO phone banks POL polling and survey rese postage, delivery and professional services (PRT print ads	nces earch messenger services legal, accounting)	RAD radio airtime an returned contrib SAL campaign work. TEL t.v. or cable airti TRC candidate travel TRS staff/spouse transfer betwee VOT voter registratio	d production costs putions ers' salaries ime and production cos , lodging, and meals vel, lodging, and meals n committees of the sa	s ame candidate/sponsor
NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
JC Evans, Inc.	LIT	1,504.23	0.00	1,504.23	0.00
Lewis Consulting Group	CNS	0.00	7,500.00	0.00	7,500.00
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS \$	1,504.23	7,500.00\$	1,504.23	\$ 7,500.00
Schedule F Summary					,,300.00
Total accrued expenses incurred this period. (Include all S accrued expenses of \$100 or more, plus total unitemized and a	Schedule F, Column (b) sub accrued expenses under \$	ototals for	INCLIE	PPED TOTAL C. C.	
Total accrued expenses paid this period. (Include all Sche accrued expenses of \$100 or more, plus total unitemized a scheme this period.)	edule F. Column (c) subtat	ala fan naum			· — —
on the Summary Page, Column A, Line 9.)	•••••••••••••••	•••••	•	NET \$	5,995.77 May be a negative number

Schedule G	
Payments Made by an Agent or Independer	nt
Contractor (on Behalf of This Committee)	

Type or print in ink. Amounts may be rounded to whole dollars.

SCHEDULE G Statement covers period **CALIFORNIA** 05/21/2006

SEE INSTRUCTIONS ON REVERSE	through <u>06/16/2006</u>	Page17 of20
NAME OF FILER		
Norby for Supervisor		I.D. NUMBER
• • • • • • • • • • • • • • • • • • • •		1237231
NAME OF AGENT OR INDEPENDENT CONTRACTOR		
AMS Response		

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. CMP campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs CNS campaign consultants MTG meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)* office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating t.v. or cable airtime and production costs candidate filing/ballot fees FIL PHO phone banks candidate travel, lodging, and meals TRC FND fundraising events polling and survey research TRS staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain)* ND postage, delivery and messenger services transfer between committees of the same candidate/sponsor TSF LEG legal defense PRO professional services (legal, accounting) voter registration VOT LIT campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail)

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D.

	NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
US Postmaster		POS	T		
• 4					7,227.20
		1			
					1
JS Postmaster		POS			6,711.3
					0,,11.3
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		-			
US Postmaster					
		LIT			3,717.1
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			ŀ		
		}	Ī		
					(

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$

17,655.72

^{*} Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

Schedule G Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.

Amounts may be rounded to whole dollars.

SEE INSTRUCTIONS ON REVERSE	through 06/16/2006	Page18 of20
NAME OF FILER		- age or
Norby for Supervisor		I.D. NUMBER
		1237231
NAME OF AGENT OR INDEPENDENT CONTRACTOR		~
Mr. Chris Norby		

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. campaign paraphernalia/misc. MBR member communications radio airtime and production costs RAD campaign consultants MTG meetings and appearances RFD returned contributions contribution (explain nonmonetary)* CTB OFC office expenses campaign workers' salaries SAL CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals FND fundraising events polling and survey research TRS staff/spouse travel, lodging, and meals ND independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor LEG legal defense professional services (legal, accounting) PRO VOT voter registration LIT campaign literature and mailings PRT print ads information technology costs (internet, e-mail) WEB

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER LD, NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Stater Bros. Market	MTG	Precinct Walking Supplies	109.13
Table Ten California Grill	MTG	Election Night Party	1,067.72

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$

1,176.85

^{*} Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

Schedule G Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

			CUEDOFF (
State	ment covers period	CALIFORNIA	400
om	05/21/2006	CALIFORNIA FORM	460

SEE INSTRUCTIONS ON REVERSE	through 06/16/2006	Page 19 of 20
NAME OF FILER		Page of
Norby for Supervisor		I.D. NUMBER
		1237231
NAME OF AGENT OR INDEPENDENT CONTRACTOR		
Tony Siciliani		-

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs CNS campaign consultants MTG meetings and appearances returned contributions RFD contribution (explain nonmonetary)* CTB office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating t.v. or cable airtime and production costs FIL candidate filing/ballot fees phone banks candidate travel, lodging, and meals FND fundraising events polling and survey research staff/spouse travel, lodging, and meals TRS independent expenditure supporting/opposing others (explain)* ND postage, delivery and messenger services transfer between committees of the same candidate/sponsor TSF LEG legal defense professional services (legal, accounting) voter registration VOT LIT campaign literature and mailings PRT print ads information technology costs (internet, e-mail) WEB

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	ANGUNT
OS Postmaster	LIT		AMOUNT PAID
			6,480.0
S Postmaster	LIT		
			3,540.0
			,
S Postmaster	LIT		
			3,695.0
			1

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$

13,715.00

^{*} Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

Schedule G	
Payments Made by an Agent or Independen	t
Contractor (on Behalf of This Committee)	•

Type or print in ink. Amounts may be rounded to whole dollars.

	SCHEDULE G
ment covers period	CALIFORNIA 460
05/21/2006	FORM 40U

I.D. NUMBER 1237231

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Staten	nent covers period	CALIE	ORNIA	10	Ī
from	05/21/2006		RM	 1 6(J
through_	06/16/2006		20	 30	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Norby for Supervisor

NAME OF AGENT OR INDEPENDENT CONTRACTOR

The Monaco Group Inc.

candidate filing/ballot fees

campaign literature and mailings

CVC civic donations

FND fundraising events

legal defense

FIL

ND

LEG

LIT

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)*

independent expenditure supporting/opposing others (explain)*

MBR member communications MTG meetings and appearances

OFC office expenses PET petition circulating

PHO phone banks POL

polling and survey research postage, delivery and messenger services

professional services (legal, accounting) PRO

RAD radio airtime and production costs

RFD returned contributions SAL campaign workers' salaries

t.v. or cable airtime and production costs TEL candidate travel, lodging, and meals TRC staff/spouse travel, lodging, and meals TRS

transfer between committees of the same candidate/sponsor TSF

VOT voter registration

PRT print ads WEB information technology costs (internet, e-mail)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	
S Postmaster	LIT			AMOUNT PAID
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ach additional information on appropriately labeled continuation at a track	<u> </u>			

ch additional information on appropriately labeled continuation sheets.

TOTAL* \$

5,650.00

^{*} Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.